Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Document Page 1 of 51

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
	-	About Debtor 1:	About	Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Donita First name A. Middle name	First n	
	Bring your picture identification to your meeting with the trustee.	Henderson Last name and Suffix (Sr., Jr., II, III)	Last na	ame and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9525		

Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Document Page 2 of 51

Case number (if known)

Debtor 1 Donita A. Henderson

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs			
5.	Where you live	6301 Upper Ridge Dr. Canal Winchester, OH 43110	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Franklin	Overtee			
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Document Page 3 of 51 Case 2:19-bk-56027

Case number (if known) Debtor 1 Donita A. Henderson

⊃ar	t 2: Tell the Court About	Your Ba	nkruptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	■ Ch	apter 7				
		☐ Ch	apter 11				
		☐ Ch	apter 12				
		☐ Ch	apter 13				
3.	How you will pay the fee	-	about how yo	ou may pay. Typ attorney is sub	pically, if you are paying the fee yo	k with the clerk's office in your local court for more deturself, you may pay with cash, cashier's check, or moalf, your attorney may pay with a credit card or check	ney
				y the fee in ins ee in Installment	on, sign and attach the Application for Individuals to Po	pplication for Individuals to Pay	
			I request that but is not req	nt my fee be wa uired to, waive	aived (You may request this option your fee, and may do so only if you	n only if you are filing for Chapter 7. By law, a judge m ur income is less than 150% of the official poverty line n installments). If you choose this option, you must fill	e that
						ial Form 103B) and file it with your petition.	out
).	Have you filed for bankruptcy within the	■ No.					
	last 8 years?	☐ Yes	3.				
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	3.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ No.	Go to I	ine 12.			
	rootuerioe :	☐ Yes	s. Has yo	our landlord obta	ained an eviction judgment agains	t you?	
				No. Go to line	12.		
				Yes. Fill out In this bankrupto		Judgment Against You (Form 101A) and file it as part	of

Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Document Page 4 of 51

Debtor 1 Donita A. Henderson Document Page 4 of 51 Case number (if known)

Part	Report About Any Bu	sinesses	You Own	as a Sole Proprietor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.
		☐ Yes.	Name	e and location of business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any
	If you have more than one sole proprietorship, use a separate sheet and attach			per, Street, City, State & ZIP Code
	it to this petition.			k the appropriate box to describe your business:
				Health Care Business (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as defined in 11 U.S.C. § 101(53A))
				Commodity Broker (as defined in 11 U.S.C. § 101(6))
				None of the above
Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your				
	For a definition of small	■ No.	I am r	not filing under Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code.	illing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy .
		☐ Yes.	I am f	iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Pari	4: Report if You Own or	Have Any	Hazardo	ous Property or Any Property That Needs Immediate Attention
	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property? Number, Street, City, State & Zip Code
				Number, Street, City, State & Zip Code

Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Document Page 5 of 51

Debtor 1 Donita A. Henderson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 51 Case number (if known) Debtor 1 Donita A. Henderson Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Donita A. Henderson Signature of Debtor 2 Donita A. Henderson Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on September 19, 2019

MM / DD / YYYY

Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Document Page 7 of 51

Debtor 1 Donita A. Henderson Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Tad A. Semons	Date	September 19, 2019	
Signature of Attorney for Debtor		MM / DD / YYYY	
Tad A. Semons			
Printed name			
Tad A. Semons			
Firm name			
85 E. Gay St. Ste. 600			
Columbus, OH 43215			
Number, Street, City, State & ZIP Code			
Contact phone 614-228-1930	Email address	tadsemons@att.net	
0069743 OH			
Bar number & State			

		Docum	ent Page 8 of 51	
Fill in this inform	mation to identify your	case:		
Debtor 1	Donita A. Hender	son		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number _				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	11,502.17
	1c. Copy line 63, Total of all property on Schedule A/B	\$	11,502.17
Pa	t 2: Summarize Your Liabilities		
			abilities I you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	95,388.00
	Your total liabilities	\$	95,388.00
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,544.83
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,765.00
Pa	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
	■ Yes		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Entered 09/19/19 10:55:07 Desc Main Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Page 9 of 51
Case number (if known) Document

Debtor 1 Donita A. Henderson

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

3,398.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cl	aim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case 2:19-bk-56027	Doc 1	Filed 09/19/19	Entered 09/19/19 10:55:07	Desc Maii

			Document	Page 10 of 51				
Fill in	this info	ormation to identify your	case and this filing:					
Debto	or 1	Donita A. Hende	rson					
Dobto	O	First Name	Middle Name	Last Name				
Debto (Spouse	or ∠ e, if filing)	First Name	Middle Name	Last Name				
United	d States	Bankruptcy Court for the:	SOUTHERN DISTRICT OF OH	IO				
						_		
Case	number			_			Check if this is an amended filing	
							3	
∩ffi	cial E	orm 106A/B						
			- m4. r					
		ıle A/B: Prop		. 61. 1			12/15	
think it informa Answer	fits best. ation. If m r every qu	Be as complete and accuratore space is needed, attachestion.	pe items. List an asset only once. If ate as possible. If two married peop a separate sheet to this form. On t	le are filing together, both ar he top of any additional page	e equally responsible	for supply	ying correct	
Part 1:	Descri	be Each Residence, Buildin	g, Land, or Other Real Estate You O	wn or Have an Interest In				
1. Do y	ou own o	or have any legal or equitable	e interest in any residence, building	g, land, or similar property?				
■ N	lo. Go to F	Part 2.						
ΠY	es. Wher	e is the property?						
Part 2:	Descri	be Your Vehicles						
someo	ne else d s, vans,	drives. If you lease a vehic	uitable interest in any vehicles, ele, also report it on Schedule G: I tility vehicles, motorcycles			iny vehic	les you own that	
3.1	Make:	Kia	Who has an interest in t	he property? Check one		Do not deduct secured claims or exemptions. Put		
	Model:	Sorrento	Debtor 1 only			the amount of any secured claims on Sche Creditors Who Have Claims Secured by P		
	Year:	2012	Debtor 2 only		Current value of the		urrent value of the	
		nate mileage:ormation:	Debtor 1 and Debtor 2 At least one of the debtor 2	•	entire property?	po	ortion you own?	
1	Other IIII	omaton.	At least one of the dec	otors and another				
			Check if this is comr	nunity property	\$11,000.	00	\$11,000.00	
			(See Instructions)					
Example 1 Address Example 1 Address Example 2 Ad	mples: B No 'es	oats, trailers, motors, pers	NTVs and other recreational vehonal watercraft, fishing vessels, so you own for all of your entries.	nowmobiles, motorcycle ac	cessories		\$11,000.00	
Part 3:	Descri	be Your Personal and Hous	ehold Items					
Do yo	ou own o	r have any legal or equi	able interest in any of the follo	wing items?		port Do r	rent value of the tion you own? not deduct secured ms or exemptions.	

Official Form 106A/B Schedule A/B: Property page 1

Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Document Page 11 of 51 Case number (if known) Debtor 1 Donita A. Henderson 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ Yes. Describe..... 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ■ No ☐ Yes. Describe..... 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$0.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the

portion you own? Do not deduct secured claims or exemptions.

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

□ No

Cash \$20.00 Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07

Page 12 of 51
Case number (if known) Document Debtor 1 Donita A. Henderson 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... \$476.35 Checking (Bridge FCU) 17.1. \$5.82 17.2. Savings (Bridge FCU) 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: **PERS** Unknown 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

■ No

☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

■ No

☐ Yes. Give specific information about them...

Debtor 1		2:19-bk-56027 ta A. Henderson	Doc 1	Filed 09/19/2 Document		Entered 09/19/19 10:55: age 13 of 51 Case number (if know	
						<u> </u>	
<i>Exa</i> ■ No	<i>mples:</i> Bui ı	chises, and other ge Iding permits, exclusiv	e licenses, co	bles operative association	n hole	dings, liquor licenses, professional lice	nses
Money	or propert	y owed to you?					Current value of the
		, ,					portion you own? Do not deduct secured claims or exemptions.
28. Tax	refunds o	wed to you					
■ No							
∐ Ye	s. Give sp	ecific information abou	it them, includ	ling whether you alre	ady f	filed the returns and the tax years	
	•		mony, spousa	l support, child suppo	ort, m	naintenance, divorce settlement, prope	erty settlement
		ecific information					
	30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else						
■ Ye	s. Give sp	pecific information					
			Wagaa				Unknown
			Wages				Olikilowii
<i>Exa</i> □ No	<i>mples:</i> He	ne insurance company	of each polic		HSA)); credit, homeowner's, or renter's insu	
		Compa	ny name:			Beneficiary:	Surrender or refund value:
		Emplo	yer Group	Term		_	\$0.00
If you som	32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No □ Yes. Give specific information						
						made a demand for payment	
Exa ■ No	•	cidents, employment d	isputes, insur	ance claims, or rights	to s	ue	
		oe each claim					
34. Othe		ent and unliquidated	claims of ev	ery nature, includin	g co	unterclaims of the debtor and rights	to set off claims
■ Ye	s. Describ	oe each claim					
			2019 Tax	Refund			Unknown
35. Anv	financial	assets you did not al	ready list				

35

■ No

 \square Yes. Give specific information..

Debt	tor 1 Donita A. Henderson	Document	Page 14 of 51 Case number (if ki	nown)
36.	Add the dollar value of all of your entries for Part 4. Write that number here	•		\$502.17
Part !	5: Describe Any Business-Related Property You	u Own or Have an Inte	est In. List any real estate in Part 1.	
37. D	o you own or have any legal or equitable interes	t in any business-relat	ed property?	
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part (6: Describe Any Farm- and Commercial Fishing If you own or have an interest in farmland, list it		Own or Have an Interest In.	
16. C	Oo you own or have any legal or equitable i	interest in any farm-	or commercial fishing-related property?	
	No. Go to Part 7.			
I	Yes. Go to line 47.			
Part 1	7: Describe All Property You Own or Have	an Interest in That Yo	ı Did Not List Above	
1	Oo you have other property of any kind you Examples: Season tickets, country club memb		?	
	Yes. Give specific information			
54.	Add the dollar value of all of your entries f	from Part 7. Write th	at number here	\$0.00
Part 8	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5		\$11,000.00	
57.	Part 3: Total personal and household item	ns, line 15	\$0.00	
58.	Part 4: Total financial assets, line 36		\$502.17	
59.	Part 5: Total business-related property, lin	ne 45	\$0.00	

\$0.00

\$0.00

Copy personal property total

\$11,502.17

Official Form 106A/B Schedule A/B: Property page 5

60. Part 6: Total farm- and fishing-related property, line 52

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

Part 7: Total other property not listed, line 54

\$11,502.17

\$11,502.17

			Document	F	Page 15 of 51	<u>_</u>
Fil	I in this inform	nation to identify your	case:			
De	btor 1	Donita A. Hender	son			
_		First Name	Middle Name	L	ast Name	
	btor 2 ouse if, filing)	First Name	Middle Name	L	ast Name	
Un	ited States Bar	kruptcy Court for the:	SOUTHERN DISTRICT OF	оню		
Ca	se number					
(if k	nown)					Check if this is an amended filing
Oí	fficial For	m 106C				
			perty You Cla	im	as Exempt	4/19
					•	or supplying correct information. Using
the nee	property you lis	sted on <i>Schedule A/B: F</i> d attach to this page as	Property (Official Form 106A/B)	as yo	our source, list the property that you	
spe any fun exe	cific dollar am applicable stade ds—may be un mption to a pa	nount as exempt. Alter atutory limit. Some exc nlimited in dollar amou	natively, you may claim the femptions—such as those for unt. However, if you claim an	ull fa heal exen	ir market value of the property be th aids, rights to receive certain b option of 100% of fair market valu	One way of doing so is to state a ing exempted up to the amount of penefits, and tax-exempt retirement be under a law that limits the t, your exemption would be limited
		y the Property You Cla	im as Exempt			
1.	Which set of	exemptions are you c	laiming? Check one only, ever	n if yo	our spouse is filing with you.	
	You are cla	niming state and federal	nonbankruptcy exemptions.	11	S.C. & 522(b)(3)	
	_	G	ns. 11 U.S.C. § 522(b)(2)	0.0	3.0. § 022(b)(0)	
2				mnt	fill in the information below	
۷.		• •	•	•	fill in the information below.	Charific laws that allow examplian
		on of the property and ling that lists this property	e on Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.		
	Cash		\$20.00		\$20.00	Ohio Rev. Code Ann. §
	Line from Sch	edule A/B: 16.1			100% of fair market value, up to	2329.66(A)(3)
					any applicable statutory limit	
	Checking (E	Bridge FCU) nedule A/B: 17.1	\$476.35		\$476.35	Ohio Rev. Code Ann. § 2329.66(A)(3)
	Line nom Sch	edule A/B. 11.1			100% of fair market value, up to	2329.00(A)(3)
					any applicable statutory limit	
	Savings (Br	ridge FCU) nedule A/B: 17.2	\$5.82		\$5.82	Ohio Rev. Code Ann. § 2329.66(A)(18)
					100% of fair market value, up to any applicable statutory limit	
3.	(Subject to ad ■ No	justment on 4/01/22 and you acquire the propert	, ,	ses fi	led on or after the date of adjustments, 215 days before you filed this case	•

Official Form 106C

☐ Yes

Case 2.19-0K-5002		entere age 16 of	u 09/19/19 1	LU.55.U/ D	iest main	
Fill in this information to identify ye		ide 16 0	31			
Debtor 1 Donita A. Hen First Name		t Name				
Debtor 2	Middle Harrie Last	Nume				
(Spouse if, filing) First Name	Middle Name Last	t Name				
United States Bankruptcy Court for th	e: SOUTHERN DISTRICT OF OHIO					
Case number						
(if known)				_ c	heck if this is an	
				aı	mended filing	
O#: 1-1 F 400D						
Official Form 106D						
Schedule D: Creditor	s Who Have Claims Sec	cured k	y Propert	У	12/15	
	e. If two married people are filing together, bo it out, number the entries, and attach it to this					
1. Do any creditors have claims secured	by your property?					
☐ No. Check this box and submi	t this form to the court with your other sche	dules. You h	ave nothing else t	o report on this fo	rm.	
Yes. Fill in all of the informatio	n below.					
Part 1: List All Secured Claims						
	s more than one secured claim, list the creditor s	senarately	Column A	Column B	Column C	
for each claim. If more than one creditor h	as a particular claim, list the other creditors in Pa etical order according to the creditor's name.	art 2. As	Amount of claim Do not deduct the value of collateral.	Value of collaters that supports thi claim		
2.1 x	Describe the property that secures the cla		\$0.00	\$11,000.		
Creditor's Name	2012 Kia Sorrento					
	As of the date you file, the claim is: Check apply. ☐ Contingent	all that				
Number, Street, City, State & Zip Code	☐ Unliquidated					
	☐ Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
■ Debtor 1 only	An agreement you made (such as mortga	age or secured	i			
☐ Debtor 2 only	car loan)					
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	s's lien)				
☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit						
☐ Check if this claim relates to a community debt	Other (including a right to offset)					
Date debt was incurred	Last 4 digits of account number					
-	Column A on this page. Write that number he	ere:		0.00		
If this is the last page of your form, ac Write that number here:	ld the dollar value totals from all pages.			0.00		
			_			

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		Document	Page 17 of 51	
Fill in this i	information to identify your	case:		
Debtor 1	Donita A. Henders	son		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name	
United State	es Bankruptcy Court for the:	SOUTHERN DISTRICT OF C	DHIO	
Case numb	er		С	Check if this is an amended filing
	Form 106E/F le E/F: Creditors W	/ho Have Unsecured	I Claims	12/15
any executor Schedule G: Schedule D: left. Attach th name and cas	y contracts or unexpired leases Executory Contracts and Unexp Creditors Who Have Claims Sec	that could result in a claim. Also ired Leases (Official Form 106G). ured by Property. If more space is le. If you have no information to re	TY claims and Part 2 for creditors with NONPRIORITY list executory contracts on Schedule A/B: Property (C Do not include any creditors with partially secured class a needed, copy the Part you need, fill it out, number the aport in a Part, do not file that Part. On the top of any a	Official Form 106A/B) and on aims that are listed in e entries in the boxes on the
	creditors have priority unsecure			
■ No. G	Go to Part 2.	,		
☐ Yes.	70 10 1 411 21			
— 103.				
Part 2:	ist All of Your NONPRIORIT	Y Unsecured Claims		
3. Do any o	creditors have nonpriority unsec	cured claims against you?		
☐ No. Y	ou have nothing to report in this p	art. Submit this form to the court with	h your other schedules.	
Yes.				
unsecure	ed claim, list the creditor separately	y for each claim. For each claim liste	the creditor who holds each claim. If a creditor has more did, identify what type of claim it is. Do not list claims alread have more than three nonpriority unsecured claims fill out	ly included in Part 1. If more
				Total claim
4.1 Ac	tion Financial Services	Last 4 digits of ac	count number	\$74,244.00
	priority Creditor's Name	When we the deb		
	D. Box 3250 ntral Point, OR 97502	When was the deb	ot incurred?	
	nber Street City State Zip Code	As of the date you	ı file, the claim is: Check all that apply	
Who	o incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and and	other Type of NONPRIO	RITY unsecured claim:	
	Check if this claim is for a comr			
deb Is th	t ne claim subject to offset?	Obligations aris report as priority cla	ing out of a separation agreement or divorce that you did	not
IS tr	•		arms on or profit-sharing plans, and other similar debts	
_ ·		·	Student Loan	
	1 5 3	Other. Specify	Ottaviii Evaii	

Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Document Page 18 of 51

Debte	Donita A. Henderson	Case number (if known)	
4.2	AEP	Last 4 digits of account number	\$279.00
	Nonpriority Creditor's Name Attn: Bankruptcy 1 AEP Way	When was the debt incurred?	
	Hurricane, WV 25526 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Utility	
4.3	Alliance One	Last 4 digits of account number	\$1,057.00
	Nonpriority Creditor's Name 4850 E. Street Rd. Ste. 300 Feasterville Trevose, PA 19053	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Misc.	
4.4	Alliance One	Last 4 digits of account number	\$1,059.00
	Nonpriority Creditor's Name 4850 E. Street Rd. Ste. 300	When was the debt incurred?	
	Feasterville Trevose, PA 19053 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Misc.	

Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Document Page 19 of 51

Debtor 1 Donita A. Henderson ase number (if known) 4.5 **Asset Recovery Solutions** \$549.00 Last 4 digits of account number Nonpriority Creditor's Name 2200 E. Devon Ave. Ste. 200 When was the debt incurred? Des Plaines, IL 60018-4501 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Other. Specify Misc. ☐ Yes 4.6 CashMax Ohio Last 4 digits of account number \$550.00 Nonpriority Creditor's Name When was the debt incurred? 981 N. Bridge St. Chillicothe, OH 45601 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Loan Other. Specify 4.7 **CBCS** Last 4 digits of account number \$652.00 Nonpriority Creditor's Name When was the debt incurred? P.O. Box 1022 Wixom, MI 48393 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Misc.

Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Document Page 20 of 51
Case number (if known)

Debto	Donita A. Henderson	Case number (if known)	
4.8	Childrens Radiologic Institute	Last 4 digits of account number	\$7.00
	Nonpriority Creditor's Name		V 1100
	P.O. Box 78000	When was the debt incurred?	
	Detroit, MI 48278-1662 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
	<u> </u>		
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical	
4.9	Client Services	Last 4 digits of account number	\$383.00
	Nonpriority Creditor's Name		•
	P.O. Box 1503	When was the debt incurred?	
	Saint Peters, MO 63376 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
	<u> </u>		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Misc.	
4.1	Columbia Gas	Look delimits of account number	\$203.00
0	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ200.00
	290 W. Nationwide Blvd. Columbus, OH 43215	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Utility	

Document Page 21 of 51 Debtor 1 Donita A. Henderson ase number (if known) 4.1 **Columbus Radiology Corporation** \$90.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 713999 When was the debt incurred? Cincinnati, OH 45271-3999 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical 4.1 **Dental Faculty Practice** \$4,203.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 78000 Detroit, MI 48278-1622 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Dental ☐ Yes 4.1 Halsted Financial Services, LLC \$1.041.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 828 When was the debt incurred? Skokie, IL 60076 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

Official Form 106 E/F

debt

■ No

☐ Yes

☐ Student loans

Other. Specify

report as priority claims

 \square Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Misc.

☐ Check if this claim is for a community

Is the claim subject to offset?

Page 22 of 51 Document Debtor 1 Donita A. Henderson ase number (if known) 4.1 **HRRG** \$60.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 5406 When was the debt incurred? Cincinnati, OH 45273-7942 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Misc. 4.1 Javitch Block LLC \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 1100 Superior Ave., 19th Fl. When was the debt incurred? Cleveland, OH 44114-2521 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Notice 4.1 Jefferson Capital Systems \$549.00 Last 4 digits of account number 6 Nonpriority Creditor's Name P.O. Box 7999 When was the debt incurred? Saint Cloud, MN 56302-9617 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

Other. Specify

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Misc.

Is the claim subject to offset?

Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Document Page 23 of 51

Debtor 1 Donita A. Henderson ase number (if known) 4.1 **Mid-Ohio Emergency Services** \$60.00 Last 4 digits of account number Nonpriority Creditor's Name 111 S. Grant Ave. When was the debt incurred? Columbus, OH 43215 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical 4.1 Nationwide Childrens' Hospital \$1,500.00 Last 4 digits of account number 8 Nonpriority Creditor's Name When was the debt incurred? P.O. Box 78000 Detroit, MI 48278-1117 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes 4.1 **Ohio Health** \$428.00 9 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 183221 When was the debt incurred? Columbus, OH 43218-3221 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify

Medical

Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Document Page 24 of 51

Debtor 1 Donita A. Henderson Case number (if known) 4.2 **Physicians Credit Bureau** \$1,278.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 3592 Cororate Dr. #105 When was the debt incurred? Columbus, OH 43231 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical 4.2 **Portfolio Recovery Associates** \$921.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 41067 Norfolk, VA 23541 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Misc. 4.2 **Portfolio Recovery Associates** \$1.181.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 41067 When was the debt incurred? Norfolk, VA 23541 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Misc. Other. Specify

Document Page 25 of 51 Debtor 1 Donita A. Henderson ase number (if known) 4.2 Preferred Loans, LLC dba TLMAX \$1,000.00 Last 4 digits of account number 3 Nonpriority Creditor's Name P.O. Box 12699 When was the debt incurred? Columbus, OH 43212 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Misc. 4.2 Sean H. Heffernan, Esq. \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 495 E. Mound St., Ste. 200 Columbus, OH 43215 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Notice 4.2 Sterling, Inc. \$1.181.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 1799 When was the debt incurred? Akron, OH 44309-1799 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

Other. Specify

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Misc.

Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Document Page 26 of 51

Debtor 1 Donita A. Henderson ase number (if known) 4.2 \$810.00 Sterling, Inc. Last 4 digits of account number 6 Nonpriority Creditor's Name P.O. Box 1799 When was the debt incurred? Akron, OH 44309-1799 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Misc. 4.2 Sunrise Credit Services, Inc. \$1,292.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 9100 Farmingdale, NY 11735 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Misc. 4.2 **United Collection Bureau** \$428.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 5620 Southwyck Blvd. Ste. 206 When was the debt incurred? Toledo, OH 43614 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Misc. Other. Specify

Page 27 of 51 Case number (if known) Document Debtor 1 Donita A. Henderson

Wow Internet & Cable	Last 4 digits of account number	\$383.
Nonpriority Creditor's Name		
P.O. Box 5715	When was the debt incurred?	
Carol Stream, IL 60197-5715 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Misc.	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total Claim

				l otal Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Γotal	6f.	Student loans	6f.	\$ 0.00
claims rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 95,388.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 95,388.00

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

		12111111				
Fill in this information to identify your case:						
Debtor 1	Donita A. Hender	son				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States B	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO			
Case number						
(if known)						

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

		Docume	<u>nt Page 29 (</u>	of 51	
Fill in thi	s information to identify your	case:			
Debtor 1	Donita A. Hende	reon			
DCDIOI 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fi	iling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
				-	
Case nun (if known)	nber				☐ Check if this is an
(ii kilowii)					☐ Check if this is an amended filing
					amenaea iiing
Officia	al Form 106H				
Sche	dule H: Your Cod	lehtors			12/15
Jene	dule II. Toul Cou	ichtoi 3			12/13
eople ar	e filing together, both are equ	ually responsible for suppe boxes on the left. Attach	lying correct informa the Additional Page	tion. If more space is ı	ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.	
■ No					
	-				
	thin the last 8 years, have yo na, California, Idaho, Louisiana				
■ No	o. Go to line 3.				
□Y€	es. Did your spouse, former spo	ouse, or legal equivalent live	with you at the time?		
in lin Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed t	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and 2	7IP Code		Column 2: The cr	editor to whom you owe the debt
	ramo, rambor, otroot, oxy, otato and z	-11 0000		Crieck all scriedul	еѕ шасарріу.
3.1				☐ Schedule D, lir	ne
	Name			□ Schedule E/F,	
				☐ Schedule G, lir	ne
	Number Street				
	City	State	ZIP Code		
3.2				☐ Schedule D, lir	ne.
0.2	Name			☐ Schedule E/F,	
				☐ Schedule G, lir	
	Number				
	Number Street City	State	ZIP Code		

Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Document Page 30 of 51

Fill	in this information to identify your ca	ase:									
Del	Donita A. He	enderson			_						
	otor 2 puse, if filing)				_						
Uni	ted States Bankruptcy Court for the	: SOUTHERN DISTRIC	T OF OHIO		_						
(If kr	fficial Form 106I		-			Check if this is: An amended filing A supplement showing postpetition characteristic in the following date: MM / DD/ YYYY				ıpter	
	chedule I: Your Inc										12/15
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your spith you, do not include	oouse i e inforr	s livi natio	ing with y on about y	ou, inclu our spo	ude infornuse. Suse. If mo	nation ore spa	about you ace is need	ır ded,
1.	Fill in your employment information.		Debtor 1			ı	Debtor 2 or non-filing spouse				
	If you have more than one job,	Employment status	■ Employed			I	☐ Emplo	yed			
	attach a separate page with information about additional	Employment status	☐ Not employed			I	☐ Not employed				
	employers.	Occupation	Admin								
	Include part-time, seasonal, or self-employed work.	Employer's name	State of Ohio								
	Occupation may include student or homemaker, if it applies.	Employer's address	30 E. Broad St. Columbus, OH 43	3215							
		How long employed the	here? 4 years				_				_
Pai	t 2: Give Details About Mor	nthly Income									
	mate monthly income as of the duse unless you are separated.	ate you file this form. If y	you have nothing to rep	oort for	any li	ine, write \$	\$0 in the	space. Ind	clude yo	our non-filir	ng
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all e	mplo	yers for th	nat perso	n on the li	nes bel	low. If you	need
						For Debt	or 1	For Del			
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3,3	98.00	\$		N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$		N/A	

3,398.00

N/A

Calculate gross Income. Add line 2 + line 3.

Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Document Page 31 of 51

Debto	Donita A. Henderson		Case n	number (if known)			
			For I	Debtor 1	For Deb	tor 2 or	
					non-filin	g spouse	
•	Copy line 4 here	4.	\$	3,398.00	\$	N/A	
5.	List all payroll deductions:						
	5a. Tax, Medicare, and Social Security deductions	5a.	\$	177.88	\$	N/A	
;	5b. Mandatory contributions for retirement plans	5b.	\$	339.73	\$	N/A	-
	5c. Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	-
;	5d. Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	•
	5e. Insurance	5e.	\$	293.09	\$	N/A	-
;	5f. Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g. Union dues	5g.	\$	42.47	\$	N/A	-
	5h. Other deductions. Specify:	5h.+	\$	0.00	+ \$	N/A	-
6.	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	853.17	\$	N/A	-
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,544.83	\$	N/A	-
	List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
	monthly net income.	8a.	\$	0.00	\$	N/A	
	8b. Interest and dividends	8b.	\$	0.00	\$	N/A	-
	 8c. Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 	8c. 8d.	\$	0.00	\$ \$	N/A N/A	-
	8e. Social Security	8e.	\$	0.00	\$	N/A	-
;	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	_
	8g. Pension or retirement income	8g.	\$	0.00	\$	N/A	
1	8h. Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A	=
9.	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	\
10.	Calculate monthly income. Add line 7 + line 9.	10. \$	2	2,544.83 + \$	N,	/A = \$	2,544.83
	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						•
	State all other regular contributions to the expenses that you list in <i>Schedul</i> Include contributions from an unmarried partner, members of your household, you other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are no Specify:	ur depen		•	ed in <i>Sche</i> e	dule J. 1. +\$	0.00
,	Add the amount in the last column of line 10 to the amount in line 11. The re Write that amount on the Summary of Schedules and Statistical Summary of Certapplies				, if it	2. \$	2,544.83
						Combin	ned y income
	Do you expect an increase or decrease within the year after you file this form No. Yes. Explain: □	m?				monun	y mcome

Official Form 106l Schedule I: Your Income page 2

Debtor 1 Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO Case number (If known) Official Form 106J Check if this is: An amended filing A supplement showing postpetition chapter 13 expenses as of the following date: MM / DD / YYYY	Fill	in this informa	tion to identify yo	our case:			1		
Debtor 2 Case number (is known)							Chec	k if this is:	
Spouse, if filing 13 expenses as of the following date:			Dollita A. He	iluei soli			An amended filing		
Case number ((It known)) Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Your Household Is this a joint case? No. Go to line 2 Yes. Does Debtor 2 live in a separate household? No or list Debtor 2 number of list of									
Case number (If known) Continued Cont	Unit	ed States Bankr	ruptcy Court for the	: SOUTH	IERN DISTRICT OF OHIO)			
Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Your Household									
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Raft Describe Your Household									
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Answer every question.	Of	fficial Fo	rm 106J						
information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part Describe Your Household	S	chedule	J: Your	Exper	ises				12/1
1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? Solution of the comment of the	info	ormation. If m	ore space is ne	eded, atta	ch another sheet to this				
No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No. Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents? No. Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Child Sale Yes. Child 17 Yes. Child 17 Yes. No. Yes. 3. Do your expenses include expenses of people other than yourself and your dependents? Yes. No. Yes. No. Third in the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106J.) If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. \$ 0.00 4d. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues	Par			ehold					
Yes. Does Debtor 2 live in a separate household? No	1.								
No				in a senar	ate household?				
Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents?				ш а зерап	ate flouseffold:				
Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Child Child 8 Yes Child 17 Yes Child 17 Yes Child 17 Yes 3. Do your expenses include expenses of people other than your dependents? yourself and your dependents? Stimate Your Ongoing Monthly Expenses Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filled. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. Real estate taxes 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. S				st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debt	or 2.	
Debtor 2. Do not state the dependents names. Child S Child S Pes Child S Pes No No Child 17 Pes No No No No No No No No No Pes No Pes No Pes No No No Pes No Pes No Pes No No Pes No Pes No Pes No No Pes No No Pes No Pes No No Pes No Pes No No No No Pes No No No No No Pes No No No No No No Pes No No No No No No No No No N	2.	Do you have	e dependents?	□ No					
Child 8			ebtor 1 and	■ Yes.					
Child 17 Yes No No Yes 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues 4d. \$ 50.00 100 100 100 100 100 100 100		Do not state	the					_	
Child 17 Pes No No Yes Yes No Yes Yes No Yes No Yes		dependents	names.			Child		<u>8</u>	
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2:						Child		17	
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. Real estate taxes 4a. Real estate taxes 4b. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. None maintenance, repair, and upkeep expenses 4d. \$ 0.00 0.00								-	— · · ·
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. \$ 30.00 4d. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 10.00									
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I</i> : Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00									
expenses of people other than your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 995.00 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues 4d. \$ 0.00 10.00	3.				No	-			□ 162
Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues 4d. \$ 0.00 4d. \$ 0.00				han _	***				
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues	Davi				h. F.manaa				
the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 995.00 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues 4d. \$ 0.00	Est exp	imate your ex enses as of a	penses as of y	our bankr	uptcy filing date unless y				
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues Your expenses 4. \$ 995.00 4. \$ 995.00 4. \$ 30.00 4. \$ 30.00 4. \$ 30.00 4. \$ 30.00 4. \$ 30.00 4. \$ 30.00 4. \$ 30.00	Inc	lude expense	s paid for with	non-cash	government assistance i	f you know			
payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4. \$ 995.00 4a. \$ 0.00 4b. \$ 30.00 4c. \$ 50.00 4d. \$ 0.00				d have inc	cluded it on Schedule I: \	our Income		Your exp	enses
4a.Real estate taxes4a. \$0.004b.Property, homeowner's, or renter's insurance4b. \$30.004c.Home maintenance, repair, and upkeep expenses4c. \$50.004d.Homeowner's association or condominium dues4d. \$0.00	4.					nclude first mortgage	e 4. \$		995.00
4b.Property, homeowner's, or renter's insurance4b.\$30.004c.Home maintenance, repair, and upkeep expenses4c.\$50.004d.Homeowner's association or condominium dues4d.\$		If not includ	led in line 4:						
4b.Property, homeowner's, or renter's insurance4b.\$30.004c.Home maintenance, repair, and upkeep expenses4c.\$50.004d.Homeowner's association or condominium dues4d.\$		4a. Real e	estate taxes				4a. \$		0.00
4d. Homeowner's association or condominium dues 4d. \$ 0.00				s, or renter	's insurance				-
	5					me equity loans			

Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Document Page 33 of 51

Debtor 1 Do	nita A. Henderson	Case num	ber (if known)	
. Utilities:				
	ectricity, heat, natural gas	6a.	\$	250.00
	ater, sewer, garbage collection	6b.		30.00
	ephone, cell phone, Internet, satellite, and cable services	6c.		120.00
	ner. Specify:	6d.	*	0.00
	d housekeeping supplies	7.	·	350.00
	e and children's education costs	8.	·	
		9.	\$	0.00
_	, laundry, and dry cleaning		·	50.00
	care products and services	10.	\$	50.00
	and dental expenses	11.	\$	200.00
•	rtation. Include gas, maintenance, bus or train fare. clude car payments.	12.	\$	200.00
	nment, clubs, recreation, newspapers, magazines, and books	13.		0.00
	le contributions and religious donations	14.		0.00
. Insuranc	<u> </u>	14.	Ψ	0.00
	clude insurance deducted from your pay or included in lines 4 or 20.			
	e insurance	15a.	\$	0.00
	alth insurance	15b.	· ·	0.00
	hicle insurance	15c.	· ·	50.00
	ner insurance. Specify:	15d.	·	0.00
	o not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
Specify:		16.	\$	0.00
	ent or lease payments:	170	¢.	200.00
	r payments for Vehicle 1	17a.		390.00
	r payments for Vehicle 2	17b.	·	0.00
	ner. Specify:	17c.		0.00
	ner. Specify:	17d.	\$	0.00
	ments of alimony, maintenance, and support that you did not report		\$	0.00
	I from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 100 yments you make to support others who do not live with you.	ы).	\$	
Specify:	yments you make to support others who do not live with you.	19.	Ψ	0.00
	al property expenses not included in lines 4 or 5 of this form or on S		our Incomo	
	rtgages on other property	20a.		0.00
	al estate taxes	20b.	· ·	0.00
	operty, homeowner's, or renter's insurance	20c.	· ·	0.00
	intenance, repair, and upkeep expenses	20d.	·	
			·	0.00
	meowner's association or condominium dues	20e.		0.00
. Other: Sp	респу:	21.	+\$	0.00
	e your monthly expenses			
	lines 4 through 21.		\$	2,765.00
	y line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J	-2	\$	
22c. Add	line 22a and 22b. The result is your monthly expenses.		\$	2,765.00
3. Calculate	e your monthly net income.			
23a. Co	py line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,544.83
	py your monthly expenses from line 22c above.	23b.	-\$	2,765.00
·				_,: ::::•
	btract your monthly expenses from your monthly income. e result is your <i>monthly net income</i> .	23c.	\$	-220.17
	e result is your <i>monthly net income</i> . Expect an increase or decrease in your expenses within the year afte			
For examp	expect an increase or decrease in your expenses within the year after le, do you expect to finish paying for your car loan within the year or do you expect in to the terms of your mortgage?			e or decrease because o
■ No.				
Пуеѕ	Explain here:			

Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Document Page 34 of 51

Fill in this infor	mation to identify your	case:			
Debtor 1	Donita A. Hender	son			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT (OF OHIO		
Case number					
(if known)					Check if this is an amended filing
If two married p You must file th obtaining mone	eople are filing togethe	n connection with a bankr	sible for supplying cor		
Sig	n Below				
Did you pa	ay or agree to pay some	one who is NOT an attorn	ney to help you fill out I	pankruptcy forms?	
■ No					
☐ Yes.	Name of person				Petition Preparer's Notice, Inature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sumn	nary and schedules file	ed with this declaration and	
X /s/ Do	nita A. Henderson		X		
	A. Henderson		Signature of	Debtor 2	
Signatu	ire of Debtor 1				
Date	September 19, 2019		Date		

Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Document Page 35 of 51

=::::::	di ta tu farmanti					
		on to identify you				
Debto		Donita A. Hende First Name	rson Middle Name	Last Name		
Debto	·	First Name	Middle Name	Last Name		
, ,	, 0,					
United	d States Bankru	ptcy Court for the:	SOUTHERN DISTRICT O	OF OHIO		
Case (if know	number				_	Check if this is an mended filing
Stat		Financial	Affairs for Individ		<u> </u>	4/19
inform	ation. If more er (if known). A	space is needed, Answer every que	attach a separate sheet to	this form. On the top of any	equally responsible for sup additional pages, write you	
1. W	hat is your cu	rrent marital statu	is?			
] Married					
	Not married					
2. D	uring the last	3 years, have you	lived anywhere other than	where you live now?		
] No					
	Yes. List all	of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
C	Debtor 1 Prior	Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	288 Fence R Canal Winche	ow Ln. ester, OH 43110	From-To: 2018	☐ Same as Debtor		☐ Same as Debtor 1 From-To:
	and territories in No Yes. Make s	nclude Arizona, Ca	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	ity property state or territor co, Texas, Washington and V	
Fi	II in the total an	nount of income yo	nployment or from operating ureceived from all jobs and a have income that you receive	all businesses, including part		ndar years?
•	I No I Yes. Fill in t	he details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	January 1 of o	current year until or bankruptcy:	■ Wages, commissions, bonuses, tips	\$26,776.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Case 2:19-bk-56027 Document

Page 36 of 51 Case number (if known) Debtor 1 Donita A. Henderson

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	or last caler anuary 1 to	ndar year: December	31, 2018)	■ Wages, commissions, bonuses, tips	\$31,989.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
		dar year be December		■ Wages, commissions, bonuses, tips	\$31,000.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
	and other winnings. List each	public bene If you are fil	fit payments; ing a joint ca the gross inco	her that income is taxable. Exa pensions; rental income; interese and you have income that yome from each source separat	est; dividends; money collect ou received together, list it of	cted from lawsuits; only once under De	royalties; an ebtor 1.	
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	yments You	ı Made Before You Filed for E	Bankruptcy			
6.		r Debtor 1's Neither D	s or Debtor 2 ebtor 1 nor I	2's debts primarily consumer Debtor 2 has primarily consu a personal, family, or household	debts? mer debts. Consumer debt	ts are defined in 11	U.S.C. § 10	1(8) as "incurred by an
			90 days befo	ore you filed for bankruptcy, did	d you pay any creditor a tota	al of \$6,825* or mo	re?	
		□ No.	Go to line 7	7.				
		☐ Yes	paid that con not include	each creditor to whom you paid reditor. Do not include paymen payments to an attorney for th	ts for domestic support obliquis bankruptcy case.	gations, such as ch	nild support a	ind alimony. Also, do
		* Subject	to adjustmen	nt on 4/01/22 and every 3 years	after that for cases filed on	or after the date o	f adjustment	
	■ Yes.			or both have primarily consuore you filed for bankruptcy, did		al of \$600 or more?	•	
		□ _{No.}	Go to line 7	7.				
		■ Yes	include pay	each creditor to whom you paid yments for domestic support ob r this bankruptcy case.				
	Creditor	's Name an	d Address	Dates of paymen	nt Total amount paid	Amount you still owe	Was this p	payment for
	Payday	Loan			\$1,000.00	\$0.00	☐ Mortga ☐ Car ☐ Credit (☐ Loan R ☐ Supplie	Card

☐ Other__

Page 37 of 51 Document ase number (*if known*) Debtor 1 Donita A. Henderson Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Reason for this payment Dates of payment **Total amount** Amount you still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number **Portfolio Recovery Associates** Account Franklin County Municipal □ Pending 18CVF00635 Court □ On appeal 375 S. High St. Concluded Columbus, OH 43215 Preferred Loans Account Franklin County Municipal □ Pending 2018CVI018489 Court □ On appeal 375 S. High St. Concluded Columbus, OH 43215 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Value of the Describe the Property property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No П Yes

Case 2:19-bk-56027

Doc 1

Filed 09/19/19

Entered 09/19/19 10:55:07 Desc Main

Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Document Page 38 of 51 Case number (if known) Case 2:19-bk-56027

Debtor 1 Donita A. Henderson

Pai	t 5: List Certain Gifts and Contributions						
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift.						
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value			
	Person to Whom You Gave the Gift and Address:						
14.	No No	cy, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?			
	☐ Yes. Fill in the details for each gift or contributions to charities that tota more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value			
Pai	t 6: List Certain Losses						
15.	Within 1 year before you filed for bankruptcor gambling? ■ No □ Yes. Fill in the details.	y or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,			
	how the loss occurred Inc	scribe any insurance coverage for the loss clude the amount that insurance has paid. List pending urance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost			
Pai	t 7: List Certain Payments or Transfers						
16.	consulted about seeking bankruptcy or prep	y, did you or anyone else acting on your behalf pay paring a bankruptcy petition? arers, or credit counseling agencies for services require		rty to anyone you			
	Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			
	Tad A. Semons 85 E. Gay St. Ste. 600 Columbus, OH 43215 tadsemons@att.net	Attorney Fees	9/12/19	\$600.00			
17.	Within 1 year before you filed for bankruptopromised to help you deal with your credito Do not include any payment or transfer that you		or transfer any prope	rty to anyone who			
	No						
	Yes. Fill in the details. Person Who Was Paid	Description and value of any property	Date payment	Amount of			
	Address	transferred	or transfer was made	payment			

Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Case 2:19-bk-56027 Page 39 of 51
Case number (if known) Document

Debtor 1 Donita A. Henderson

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not not not gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and v		paymo	ibe any property or ents received or debts n exchange	Date transfer was made
	Person's relationship to you					
	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-protein No		y property to a	self-settle	d trust or similar device o	of which you are a
	Yes. Fill in the details. Name of trust	Description and v	value of the pro	nerty trans	sferred	Date Transfer was
	Tallio of tract	2000 i pilon ana	and or the prop	porty traile	71011 Ou	made
Par	t 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposi	Boxes, and St	orage Unit	s	
	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	other financial accoun	nts; certificates	of deposi		
	Yes. Fill in the details.					
		Last 4 digits of account number	Type of accou	ınt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	bankruptcy, ar	ny safe dep	oosit box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your	home within 1	year befor	e you filed for bankrupto	y?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control fo	or Someone Else				
23.	Do you hold or control any property that som for someone.	eone else owns? Incl	ude any propert	y you bori	rowed from, are storing f	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Par	t 10: Give Details About Environmental Infor	mation				
For	the purpose of Part 10, the following definition	ns apply:				

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Case 2:19-bk-56027 Page 40 of 51 Case number (if known) Document

Debtor 1 Donita A. Henderson

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	hazardous material, pollutant, contaminant, or similar term.							
Rep	Report all notices, releases, and proceedings that you know about, regardless of when they occurred.							
24.	Has	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
		No						
		Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	i	Environmental law, if you know it	Date of notice		
25.	Hav	re you notified any governmental unit of	any release of hazardous material?					
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	i	Environmental law, if you know it	Date of notice		
26.	Hav	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.						
		No Yes. Fill in the details.						
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case		
Par	t 11:	Give Details About Your Business or	Connections to Any Business					
27.		_		v of	the following connections to any	husiness?		
21.	VVII	Vithin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
		☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
		☐ A partner in a partnership						
	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	No. None of the above applies. Go to Part 12.							
	Yes. Check all that apply above and fill in the details below for each business.							
		siness Name dress	Describe the nature of the business	-	Employer Identification number Do not include Social Security			
		mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed	idiliber of filit.		
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fir institutions, creditors, or other parties.				de all financial				
		No						
		Yes. Fill in the details below.						
	Ad	me dress mber, Street, City, State and ZIP Code)	Date Issued					
_								

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6 Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Page 41 of 51 Case number (if known) Document

Debtor 1 Donita A. Henderson

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Donita A. Henderson Signature of Debtor 2 Donita A. Henderson Signature of Debtor 1 Date September 19, 2019 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Document Page 42 of 51

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Ohio

In	re Donita A. Henderson		Case No).	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	NSATION OF ATTOI	RNEY FOR I	DEBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be pa	id to me, for service	
	For legal services, I have agreed to accept		s	600.00	
	Prior to the filing of this statement I have received		\$	600.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comp	ensation with any other person	unless they are me	mbers and associate	s of my law firm.
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name				ıy law firm. A
5.	In return for the above-disclosed fee, I have agreed to re	nder legal service for all aspect	s of the bankruptc	case, including:	
	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credite d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on ho 	ement of affairs and plan which ors and confirmation hearing, an educe to market value; exc ons as needed; preparation	n may be required; and any adjourned he mption plannin	earings thereof; g; preparation an	nd filing of
6.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis- any other adversary proceeding.	e does not include the following schargeability actions, judi	g service: cial lien avoidar	nces, relief from s	tay actions or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	y agreement or arrangement for	payment to me fo	representation of th	ne debtor(s) in
-	September 19, 2019 <i>Date</i>	Isl Tad A. Semon Tad A. Semons Signature of Attorne Tad A. Semons 85 E. Gay St. Ste. Columbus, OH 43 614-228-1930 Fa tadsemons@att.i	. 600 3215 x: 614-228-1933		

Fill in this inf	ormation to identify your case:				directed in this form and	in Form
Debtor 1	Donita A. Henderson		122	2A-1Supp:		
Debtor 2 (Spouse, if filing)			•	■ 1. There is no pres	sumption of abuse	
United State	s Bankruptcy Court for the: Southern District of	of Ohio	[applies will be r	to determine if a presui made under <i>Chapter</i> 7	•
Case number (if known)	er		_ _	☐ 3. The Means Tes	ficial Form 122A-2). t does not apply now be y service but it could ap	
					, ,	piy ialei.
Official	Form 122A - 1			☐ Check if this is a	an amended ming	
	r 7 Statement of Your Cui	rent Mor	othly Inc	ome		12/15
attach a separ case number (qualifying mili	e and accurate as possible. If two married people ate sheet to this form. Include the line number to vif known). If you believe that you are exempted fro tary service, complete and file Statement of Exempted Calculate Your Current Monthly Income	vhich the additior m a presumption	nal information a of abuse becau	ipplies. On the top of a se you do not have pri	ny additional pages, wri marily consumer debts o	te your name and or because of
	s your marital and filing status? Check one or	oly.				
	married. Fill out Column A. lines 2-11.	ııy.				
_	ried and your spouse is filing with you. Fill o	ut hoth Columns	A and R lines	2-11		
	ried and your spouse is NOT filing with you.		·	2 11.		
_	ving in the same household and are not lega	-	•	lumns A and B. lines	2-11.	
□ Li p	ving separately or are legally separated. Fill enalty of perjury that you and your spouse are living apart for reasons that do not include evading	out Column A, line	nes 2-11; do no d under nonban	t fill out Column B. By kruptcy law that appli	y checking this box, you es or that you and you	
Fill in the a 101(10A). F the 6 month	iverage monthly income that you received from all for example, if you are filing on September 15, the 6-ms, add the income for all 6 months and divide the tota in the same rental property, put the income from that property is a series of the same rental property.	sources, derived nonth period would I by 6. Fill in the res	during the 6 full be March 1 throusult. Do not include	I months before you fill ugh August 31. If the am the any income amount m	e this bankruptcy case. ount of your monthly incon nore than once. For examp	ne varied during ble, if both
·				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, deductions).	and commission	ons (before all	\$ 3,398.00	\$	
	y and maintenance payments. Do not include B is filled in.	payments from	a spouse if	\$ 0.00	\$	
of you from an and roo	ounts from any source which are regularly poor your dependents, including child support unmarried partner, members of your household mmates. Include regular contributions from a spon on the include payments you listed on line 3.	. Include regular d, your depender	contributions nts, parents,	\$0.00	\$	
5. Net inc	ome from operating a business, profession,					
		\$ 0.00	otor 1			
	eceipts (before all deductions)	-\$ 0.00 -\$				
	y and necessary operating expenses nthly income from a business, profession, or far		Copy here ->	\$ 0.00	\$	
	ome from rental and other real property	Ψ	.,			
		Deb	otor 1			
Gross r	eceipts (before all deductions)	\$ 0.00				
	y and necessary operating expenses	-\$ 0.00			•	
Net mo	nthly income from rental or other real property	\$	Copy here ->	2.22	\$	
7. Interes	t, dividends, and royalties			\$ 0.00	\$	

Official Form 122A-1

Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main

Page 44 of 51 Document Donita A. Henderson Debtor 1 Case number (if known) Column A Column B Debtor 2 or Debtor 1 non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \$ For your spouse 9. Pension or retirement income. Do not include any amount received that was a 0.00 \$ benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 3.398.00 3.398.00 2. \$ each column. Then add the total for Column A to the total for Column B. Total current monthly income Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 3,398.00 Multiply by 12 (the number of months in a year) **x** 12 40,776.00 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: OH Fill in the state in which you live. Fill in the number of people in your household. 3 74,969.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Donita A. Henderson Donita A. Henderson Signature of Debtor 1

Date September 19, 2019

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Action Financial Services P.O. Box 3250 Central Point, OR 97502

AEP

Attn: Bankruptcy 1 AEP Way Hurricane, WV 25526

Alliance One 4850 E. Street Rd. Ste. 300 Feasterville Trevose, PA 19053

Alliance One 4850 E. Street Rd. Ste. 300 Feasterville Trevose, PA 19053

Asset Recovery Solutions 2200 E. Devon Ave. Ste. 200 Des Plaines, IL 60018-4501

CashMax Ohio 981 N. Bridge St. Chillicothe, OH 45601

CBCS P.O. Box 1022 Wixom, MI 48393

Childrens Radiologic Institute P.O. Box 78000 Detroit, MI 48278-1662

Client Services P.O. Box 1503 Saint Peters, MO 63376

Columbia Gas 290 W. Nationwide Blvd. Columbus, OH 43215

Columbus Radiology Corporation P.O. Box 713999 Cincinnati, OH 45271-3999

Dental Faculty Practice P.O. Box 78000 Detroit, MI 48278-1622

Halsted Financial Services, LLC P.O. Box 828 Skokie, IL 60076

HRRG P.O. Box 5406 Cincinnati, OH 45273-7942

Javitch Block LLC 1100 Superior Ave., 19th Fl. Cleveland, OH 44114-2521

Jefferson Capital Systems P.O. Box 7999 Saint Cloud, MN 56302-9617

Mid-Ohio Emergency Services 111 S. Grant Ave. Columbus, OH 43215

Nationwide Childrens' Hospital P.O. Box 78000 Detroit, MI 48278-1117

Ohio Health P.O. Box 183221 Columbus, OH 43218-3221

Physicians Credit Bureau 3592 Cororate Dr. #105 Columbus, OH 43231

Portfolio Recovery Associates P.O. Box 41067 Norfolk, VA 23541

Portfolio Recovery Associates P.O. Box 41067 Norfolk, VA 23541

Preferred Loans, LLC dba TLMAX P.O. Box 12699 Columbus, OH 43212

Sean H. Heffernan, Esq. 495 E. Mound St., Ste. 200 Columbus, OH 43215

Sterling, Inc. P.O. Box 1799 Akron, OH 44309-1799

Sterling, Inc. P.O. Box 1799 Akron, OH 44309-1799

Sunrise Credit Services, Inc. P.O. Box 9100 Farmingdale, NY 11735

Case 2:19-bk-56027 Doc 1 Filed 09/19/19 Entered 09/19/19 10:55:07 Desc Main Document Page 51 of 51

United Collection Bureau 5620 Southwyck Blvd. Ste. 206 Toledo, OH 43614

Wow Internet & Cable P.O. Box 5715 Carol Stream, IL 60197-5715

Х